STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

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1 Name of Labbuiette) 1 1 P	ann Im i Markhai Ciri	au Foy	JAN 3 0 2019
1. Name of Lobbyist(s) <u>James 1 Bian</u>	•		NEW HAMPSHIRE
II. Name of lobbyist's partnership, firm or corporation, if any:			DEPARTMENT OF STATE
Bianco Professiona			<u> </u>
(Name of partnership, fir	m or corporation)		
18 Centre Street	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 225-7170 (Telephone)	(603) <u>226-0165</u> (Fax)	e-mail <u>attys@bi</u>	ancopa.com
III. This statement covers: (Choose on reportable expense transactions which	ie – file separate repor	rts for each client, OR you may	y file a separate report for
X All reportable transactions occurring	in the months prior to	the reporting date relative to the	: following client:
NH Dental S	·		
·	ent as it appears on the Lo	bbyist Registration Form)	
OR .□ All reportable transactions by the lot unrelated to any particular client.	bbyist (including the lol	bbyist's family), or the lobbying	g firm listed below which are
IV. Date of Report April 25, 2018 Reports cover: activity from date of reg.		July 25, 2018	
October 31, 20 activity from 7/1/18	18 🗆	January 30, 2019 X activity from 10/1/18 to 12/31/	78
V. There have been no fees receive If this box is checked, complete just this Concord, NH 03301.	ed and no reportable	e transactions made since the Secretary of State's Office, St	he last report. Grave House, Room 204,
VI. Check if additional reports are att			
X If you have received fees or made e			
☐ If you have paid an honorarium or r Expense Reimbursement			
☐ If you, your firm, or your family has	s made political contrib	utions, you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by Lob I have read RSA 15, RSA 15-B, RSA 14	byist 4-C and RSA 664 and h	icreby swear or affirm that the f	oregoing information is true
and complete to the best of my knowled	ge and belief.		
		January 30, 2019	
(Signature of lobbyist)		(Dat	(e)
James J. Bianco, Jr.		•	
(Print Name of lobbyist)			

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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JAN 3 0 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) James J. Bianco, Jr., Kathy Corey Fox	DEPARTMENT OF			
II. Name of lobbyist's partnership, firm or corporation, if any:				
Bianco Professional Association				
(Name of partnership, firm or corporation)				
III. Name of Client NH Dental Society	Date1/30/2019			
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services			
a) Total of all fees received in this reporting period	a) \$ 1,500			
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 48,827			
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>50,327</u>			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0</u>			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.				
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. 	a) \$ 1,500			
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>			
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0			

d) Total expenses for this reporting period	d) \$ 1,500
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 45,160
f) Total of all expenses year to date	n \$ 46,660
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from le period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
	1/30/2019
(Signature of lobbyist)	(Date)
James J. Bianco, Jr.	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:



Name of Lobbying partr	ership, firm, or corpo	ration: Bianco Profess	onal Association		
Name of Client (leave b	lank if Statement is fo	or the partnership, firm, or	corporation and not related to any		
particular client): NH	Dental Society				
Date of Report (check o	ne):				
April 25, 2018 🗆	July 25, 2018 🗀	October 31, 2018 🗆	January 30, 2019 🔯		
			nd Expenses described above, and umber of Addendum forms being		
Addendum A(s)					
Addendum B(s)					
Addendum C(s)					
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
(Signature of lobbyist)	Crughos	Jan	uary 30, 2019 (Date)		
Kathy Corey Fox					
(Print Name of lobbyist)	1				